Attorney Docket No.

#### BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST FOLLOWING

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

#### COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ANTIMYCOSIC NAIL VARNISH the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

Information For Use Without Specification Attached:

Fill in Appropriate

Insert Title:

The specification was filed on United States Application Number (if applicable) and/or and amended on the specification was filed on \_07/28/2004 as PCT International Application Number PCT/FR2004/002019 ; and was (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: a filing date before that of the application on which priority is claimed: Prior Foreign Application(s) **Priority Claimed** Insert Priority 0309303 FRANCE 07/29/2003  $\square$ Information: (Number) (Month/Day/Year Filed) (if appropriate) (Country) (Month/Day/Year Filed) (Number) (Country) (Number) (Country) (Month/Day/Year Filed) (Month/Day/Year Filed) (Country) I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below. Insert Provisional (Application Number) (Filing Date) Application(s): (if any) (Filing Date) (Application Number) All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application: Application Number Date of Filing (Month/Day/Year) Country Insert Requested Information (if appropriate) I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. (Application Number) (Filing Date) (Status - patented, pending, abandoned)

Insert Prior U.S. Application(s): (if any)

(Application Number)

Page 1 of 2 (Rev. 05/2004)

(Filing Date)

(Status - patented, pending, abandoned)

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written hotice to the contrary:

Send Correspondence to:

### CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000

Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor:	GIVEN NAME/FAMILY NAME Pascal LEFRANCOIS	INVENTOR'S SIGNATURE		DATE*			
Full Name of First or Sole Inventor: Insert Name of Inventor Inventor Insert Date This Document is Signed	Pascal LEFRANCOIS	4		11/01/2006			
Insert Residence	Residence (City, State & Country)		CITIZENSHIP				
Insert Citizenship →	LAVAUR - FRANCE	French					
Insert Post Office Address →	MAILING ADDRESS (Complete Street Address i	ncluding City, State & Country)	·				
	21, rue du Père Colin, 81500 LAVAUR - FRANCE						
Full Name of Second	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
Inventor, if any: see above	Roger NAVARRO			11/01/2006			
	Residence (City, State & Country)		CITIZENSHIP				
	PAMIERS - FRANCE		french				
	MAILING ADDRESS (Complete Street Address i	including City, State & Country)					
	Rive Neuve du Crieu, Route de Belpech, 09100 - PAMIERS - FRANCE						
Full Name of Third	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
Inventor, if any: see above	Marlène DELAUNOIS			11/01/2006			
	Residence (City, State & Country)	•	CITIZENSHIF				
	CESSALES - FRANCE	French					
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
	Bordenoble, 31290 CESSALES - FRANCE						
Full Name of Fourth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
Inventor, if any: see above	·						
	Residence (City, State & Country)	•	CITIZENSHIP	5			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
ane anove		<u> </u>	<u> </u>				
	Residence (City, State & Country)		CITIZENSHIF	•			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
	The desired to be the complete officer reduces meaning city, state a country)						
Full Name of Sixth	CHENINANG (CANGLY NAME	INDESTRUCCIONATURE		DATE*			
Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE			
	Residence (City, State & Country)	1	CITIZENSHIF	)			
	, ,,,						
	MAILING ADDRESS (Complete Street Address including City, State & Country)						

Page 2 of 2 (Rev. 05/2004)

\*DATE OF SIGNATURE

### BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

# COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	ANTIMICOSIC NAI	L VARNISH						
Fill in Appropriate			hereto. If not attached	hereto, the application	is identified by th	ne attorney docket	number as set	
t. 6	forth above and/or t		•				as	
Information - For Use Without	The specification was filed on							
Specification	and amended o	n				(if applicable	) and/or	
Attached:	the specification	was filed on 0	7/28/2004			`	as PCT	
•	International A	pplication Numb	er PCT/FR2004/00	2019			and was	
	amended on					(if ap	plicable)	
Insert Priority Information: (if appropriate)	amended by any am I acknowledge Regulations, §1.56. I do not know a thereof, or patented year prior to this applicat date of this applica representative or ass patent or inventor's application by me or I hereby claim; or inventor's certifica a filing date before the Prior Foreign App 0309303 (Number)	endment referrec the duty to dis and do not believ or described in plication, that the inon, that the inv tion in any cou signs more than certificate on thi my legal repress foreign priority it te listed below a nat of the applica lication(s)  FRANCE (Country	close information white the same was ever krany printed publication has not in puention has not been printry foreign to the lawleye months (six ms invention has been fire tatives or assigns, expenefits under Title 35, and have also identified tion on which priority	ch is material to pate mown or used in the Unit in any country befoblic use or on sale in atented or made the submited States of Ameronths for designs) prilied in any country for cept as follows.  United States Code, 9 to below any foreign apris claimed:  07/29/200 (Month/Day/	entability as definented States of Amore my or our investee United States ubject of an inventrica on an application to this applicate in the United States ubject of the United States of the United S	ed in Title 37, Co erica before my or ention thereof or n of America more to or's certificate issu ation filed by me ion, and that no a 1 States of America	de of Federal our invention nore than one than one year ted before the or my legal pplication for a prior to this n(s) for patent dificate having	
	(Number)	(Country	·)	(Month/Day/	Year Filed)	Yes	No —	
	(Number)	(Country	)	(Month/Day/	Year Filed)	☐ Yes	□ No	
	(Number)	(Country	)	(Month/Day/	Year Filed)	☐ Yes	□ No	
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.							
Insert Provisional Application(s): (if any)	(Application Numbe	r)	· · · · · · · · · · · · · · · · · · ·	(Filing Dat	е)		<del></del>	
	(Application Numbe	r)		(Filing Dat	(Filing Date)			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
Insert Requested Information: (if appropriate)	Country		Application Numb	er I	Date of Filing (Mo	nth/Day/Year)	<del></del>	
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
Insert Prior U.S. Application(s): (if any)	(Application Numbe	r)	(Filing Date)	(	Status - patented,	pending, abandone	ed)	
Page 1 of 2 (Rev. 05/2004)	(Application Numbe	r)	(Filing Date)		Status - patented,	pending, abandone	ed)	

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written hotice to the contrary:

Send Correspondence to:

### CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000

Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ull Name of First or Sole Inventor: neert Name of Inventor - neert Sate This Document is Signed	GIVEN NAME/FAMILY NAME Pascal LEFRANCOIS	INVENTOR'S SIGNATURE		DATE* 11/01/2006			
nsert Residence nsert Citizenship →	Residence (City, State & Country) LAVAUR - FRANCE		CITIZENSHIF French				
nsent Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)  21, rue du Père Colin, 81500 LAVAUR - FRANÇE						
uli Name of Second Inventor, if any: sou abovu	GIVEN NAME/FAMILY NAME Roger NAVARRO	INVENTOR SIGNATURE		DATE* 11/01/2006			
	Residence (City, State & Country) PAMIERS - FRANCE		CITIZENSHIF				
	MAILING ADDRESS (Complete Street Address including City, State & Country) Rive Neuve du Crieu, Route de Belpech, 09100 - PAMIERS - FRANCE						
ull Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME Marlène DELAUNOIS	INVENTOR'S SIGNATURE		DATE* 11/01/2006			
	Residence (City, State & Country) CESSALES - FRANCE		CITIZENSHIP				
MAILING ADDRESS (Complete Street Address including City, State & Country)  Bordenoble, 31290 CESSALES - FRANCE							
uil Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)		CITIZENSHIF				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
ull Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)		CITIZENSHIF				
	MAILING ADDRESS (Complete Street Address i	ncluding City, State & Country)					
ull Name of Sixth Inventor, if any: are above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)		CITIZENSHIF				
	MAILING ADDRESS (Complete Street Address i	ncluding City, State & Country)					

Page 2 of 2 (Rev. 05/2004)

\*DATE OF SIGNATURE

### BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

# COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	ANTIMYCOSIC NAIL	VARNISH					<u> </u>
Fill in Appropriate	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:						
Information -	forth above and/or the following:  The specification was filed on						as
For Use Without	United States App	lication Number					
Specification	and amended on _					(if applicable	) and/or
Attached:	the specification w	as filed on $\frac{07}{}$	28/2004				_ as PCT
	international Appl	ication Number	PCT/FR2004/00201	.9			aria mas
	amended on						plicable)
Insert Priority Information: (If appropriate)	amended by any amend I acknowledge the Regulations, §1.56.	Iment referred to a duty to disclo do not believe the described in an action, that the interest of the described in an action, that the invention of the invention of the interest on this in a legal represent eign priority bereits the below and of the application the disclosure of the application.	se information which is the same was ever know, y printed publication in same was not in publicion has not been patent y foreign to the Unite elve months (six month vention has been filed atives or assigns, exceptiefits under Title 35, Un have also identified bel	s material to pa n or used in the I any country be use or on sale ii ed or made the d States of Am is for designs) p in any country f as follows. ited States Code ow any foreign a	tentability as define United States of Ame fore my or our invent the United States is subject of an invent terica on an application in the United , §119(a)-(d) of any in application for paten 003	ed in Title 37, Coerica before my or notion thereof or no familiar more or's certificate issuation filed by me ion, and that no a 1 States of Americ foreign application to rinventor's certificate is a Priority (Priority Coerical Priority (Priority	our invention nore than one than one than ed before the or my legal pplication for a prior to this n(s) for patent tificate having Claimed
•	(Number)	(Country)		(Month/Day	/Voor Filed)	☐ Yes	∐ No
	(rumber)	(Country)		(Month) Day	/ real riled)	165	140
	(Number)	(Country)		(Month/Day	/Year Filed)	☐ Yes	No
	(Number)	(Country)	<del></del>	(Month/Day	/Year Filed)	☐ Yes	□ No
	I hereby claim the benef	, , , , ,	, United States Code, §1		•		
Insert Provisional							<u>_</u>
Application(s): (if any)	(Application Number)			(Filing D	ate)		
	(Application Number)			(Filing D	ate)		
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:						
	Country		Application Number		Date of Filing (Mor	nth/Day/Year)	
Insert Requested Information: (if appropriate)							
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
Insert Prior U.S. Application(s): (if any)	(Application Number)		(Filing Date)		(Status - patented, )	pending, abandon	ed)
Page 1 of 2 (Rev. 05/2004)	(Application Number)		(Filing Date)	<del></del>	(Status - patented, p	pending, abandon	ed)

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written hotice to the contrary:

Send Correspondence to:

## CUSTOMER NO. 02292 (BIRCH, STEWART; KOLASCH & BIRCH, LLP)

`•

Telephone: (703) 205-8000

Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor: Insert Name of Inventor Inventor Insert Date This Document is Signed	CIVEN NAME/FAMILY NAME Pascal LEFRANCOIS	INVENTOR'S SIGNATURE	· ·	PAT701/2006		
Insert Residence Insert Citizenship →	Residence (City, State & Country) LAVAUR - FRANCE		CITIZENSHII French			
Insert Post Office Address>	MAILING ADDRESS (Complete Street Address i 21, rue du Père Colin, 81500 LAVAU					
Full Name of Second Inventor, if any: nor above	GIVEN NAME/FAMILY NAME Roger NAVARRO	INVENTOR'S SIGNATURE		DATE* 11/01/2006		
	Residence (City, State & Country) PAMIERS - FRANCE		CITIZENSHII			
	MAILING ADDRESS (Complete Street Address including City, State & Country) Rive Neuve du Crieu, Route de Belpech, 09100 - PAMIERS - FRANCE					
Full Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME Marlène DELAUNOIS	INVENTOR'S SCRIFTURE OF		DATE* 11/01/2006		
	Residence (City, State & Country) CESSALES - FRANCE		French			
	MAILING ADDRESS (Complete Street Address including City, State & Country)  Bordenoble, 31290 CESSALES - FRANCE					
Full Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	Residence (City, State & Country)		CITIZENSHII	P		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Fifth Inventor, if any: are above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	Residence (City, State & Country)		CITIZENSHII	P		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
	Residence (City, State & Country)		CITIZENSHII	P		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					

Page 2 of 2 (Rev. 05/2004)

\*DATE OF SIGNATURE